

<i>SERFF Tracking Number:</i>	<i>PRTA-126846396</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>Protective Life Insurance Company</i>	<i>State Tracking Number:</i>	<i>46977</i>
<i>Company Tracking Number:</i>	<i>VICKIE-GAF-P</i>		
<i>TOI:</i>	<i>A02I Individual Annuities- Deferred Non-Variable</i>	<i>Sub-TOI:</i>	<i>A02I.002 Flexible Premium</i>
<i>Product Name:</i>	<i>GAF-P</i>		
<i>Project Name/Number:</i>	<i>GAF-P/GAF-P</i>		

Filing at a Glance

Company: Protective Life Insurance Company

Product Name: GAF-P

TOI: A02I Individual Annuities- Deferred Non-Variable

Sub-TOI: A02I.002 Flexible Premium

Filing Type: Form

SERFF Tr Num: PRTA-126846396 State: Arkansas

SERFF Status: Closed-Approved- Closed State Tr Num: 46977

Co Tr Num: VICKIE-GAF-P

State Status: Approved-Closed

Reviewer(s): Linda Bird

Author: Vickie Jerkins

Disposition Date: 10/07/2010

Date Submitted: 10/05/2010

Disposition Status: Approved-Closed

Implementation Date Requested: 01/01/2011

Implementation Date:

State Filing Description:

General Information

Project Name: GAF-P

Project Number: GAF-P

Requested Filing Mode: Review & Approval

Status of Filing in Domicile: Authorized

Date Approved in Domicile: 10/04/2010

Domicile Status Comments: A substantially similar filing has been approved by our domiciliary state of Tennessee effective June 23, 2010 and October 4, 2010.

Explanation for Combination/Other:

Market Type: Individual

Submission Type: New Submission

Group Market Size:

Overall Rate Impact:

Group Market Type:

Filing Status Changed: 10/07/2010

Explanation for Other Group Market Type:

State Status Changed: 10/07/2010

Deemer Date:

Created By: Vickie Jerkins

Submitted By: Vickie Jerkins

Corresponding Filing Tracking Number:

Filing Description:

FORM NUMBER....FORM TITLE

SG-GAF-P-5007.....Waiver of Withdrawal Charge and Market Value Adjustment for Terminal Condition or Nursing Facility Confinement

SG-GAF-P-5008.....Waiver of Withdrawal Charge for Terminal Condition or Nursing Facility Confinement

SG-GAF-P-5009.....Waiver of Withdrawal Charge and Market Value Adjustment for Unemployment

SERFF Tracking Number:	PRTA-126846396	State:	Arkansas
Filing Company:	Protective Life Insurance Company	State Tracking Number:	46977
Company Tracking Number:	VICKIE-GAF-P		
TOI:	A02I Individual Annuities- Deferred Non-Variable	Sub-TOI:	A02I.002 Flexible Premium
Product Name:	GAF-P		
Project Name/Number:	GAF-P/GAF-P		

SG-GAF-P-5010.....Waiver of Withdrawal Charge for Unemployment

With the exception of company specific information (Name, Logo, Addresses, Form numbering, etc) this filing is identical to a SERFF submission for West Coast Life Insurance Company.

The intended implementation date for this filing is January 1, 2011. This Individual Annuity Filing is being submitted for review and prior approval or filing acknowledged. This filing does not contain any unusual or possibly controversial items that vary from normal company or industry standards. These forms are in a series of filings which will eventually update our portfolio of products. A substantially similar filing has been approved by our domiciliary state of Tennessee effective June 23, 2010 and October 4, 2010.

These endorsements are issued in conjunction with the company's deferred annuity products, which are marketed to the general public on an individual basis by licensed producers through independent agents, banks and financial institutions, and other financial professionals such as planners and registered representatives of broker/dealers, in qualified and non-qualified markets. These endorsements are issued on a non-discriminatory basis to a range of issue ages to match the available issue ages of the associated annuities.

There is no charge for the endorsements as these are an enhancement to the base product. The cost of providing the benefit is factored into the pricing assumptions of the products with which it is offered.

Form SG-GAF-P-5007 will offer a "Waiver of Withdrawal Charge and Market Value Adjustment for Terminal condition or Nursing Facility Confinement" while SG-GAF-P-5009 offers "Waiver of Withdrawal Charge and Market Value Adjustment for Unemployment". All terms and conditions are outlined within the Endorsement. These Market Value Adjustment versions are used with Contract SG-MYG-P-2005, Approved February 22, 2010 under SERFF Tracking No. PRTA-126472065 / State No. 44698.

Form SG-GAF-P-5008 will offer a "Waiver of Withdrawal Charge for Terminal condition or Nursing Facility Confinement" while SG-GAF-P-5010 offers "Waiver of Withdrawal Charge for Unemployment". These versions are sustainably similar to the 5007 and 5009; however these versions will be issued on a base product that does not contain a Market Value Adjustment. All terms and conditions are outlined within the Endorsement. These endorsements will be issued with Contract SG-RFT-P-2005, Approved January 15, 2010 under SERFF Tracking No. PRTA-126450720 / State No. 44568.

The forms submitted in this filing have obtained the required FLESCH Ease of Reading Test Scores of 50 or greater. The forms provided in this filing have been created using a font size of 10 point or greater. The forms are in final laser print, subject only to minor modification in paper size, stock, ink, type face (but not font size), border, company logo and adaptation to computer printing, and subject to variable information as bracketed.

SERFF Tracking Number: PRTA-126846396 State: Arkansas
 Filing Company: Protective Life Insurance Company State Tracking Number: 46977
 Company Tracking Number: VICKIE-GAF-P
 TOI: A021 Individual Annuities- Deferred Non- Sub-TOI: A021.002 Flexible Premium
 Variable
 Product Name: GAF-P
 Project Name/Number: GAF-P/GAF-P

The only bracketed / variable items contained in these Endorsements are administrative information related to Company address and Officer Signature.

The submitted Endorsements are not supported by actuarial requirements. Based on this information, the actuarial materials of the previously approved contract(s) remain accurate and applicable.

If you are in need of further information to complete the review of this filing, I can be contacted via email at Vickie.Jerkins@protective.com or tollfree at 1-800-866-3555 ext. 5514.

Company and Contact

Filing Contact Information

Vickie Jerkins, Policy Contract Filing Specialist vickie.jerkins@protective.com
 2801 Highway 280 South 800-866-3555 [Phone] 5514 [Ext]
 Birmingham, AL 35223 205-268-3401 [FAX]

Filing Company Information

Protective Life Insurance Company CoCode: 68136 State of Domicile: Tennessee
 2801 Highway 280 Group Code: 458 Company Type:
 Birmingham, AL 35223 Group Name: State ID Number:
 (800) 866-3555 ext. [Phone] FEIN Number: 63-0169720

Filing Fees

Fee Required? Yes
 Fee Amount: \$200.00
 Retaliatory? No
 Fee Explanation: \$50.00 per form x 4
 Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Protective Life Insurance Company	\$200.00	10/05/2010	40264564

<i>SERFF Tracking Number:</i>	<i>PRTA-126846396</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>Protective Life Insurance Company</i>	<i>State Tracking Number:</i>	<i>46977</i>
<i>Company Tracking Number:</i>	<i>VICKIE-GAF-P</i>		
<i>TOI:</i>	<i>A02I Individual Annuities- Deferred Non-Variable</i>	<i>Sub-TOI:</i>	<i>A02I.002 Flexible Premium</i>
<i>Product Name:</i>	<i>GAF-P</i>		
<i>Project Name/Number:</i>	<i>GAF-P/GAF-P</i>		

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved-Closed	Linda Bird	10/07/2010	10/07/2010

<i>SERFF Tracking Number:</i>	<i>PRTA-126846396</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>Protective Life Insurance Company</i>	<i>State Tracking Number:</i>	<i>46977</i>
<i>Company Tracking Number:</i>	<i>VICKIE-GAF-P</i>		
<i>TOI:</i>	<i>A02I Individual Annuities- Deferred Non-</i>	<i>Sub-TOI:</i>	<i>A02I.002 Flexible Premium</i>
	<i>Variable</i>		
<i>Product Name:</i>	<i>GAF-P</i>		
<i>Project Name/Number:</i>	<i>GAF-P/GAF-P</i>		

Disposition

Disposition Date: 10/07/2010

Implementation Date:

Status: Approved-Closed

Comment:

Rate data does NOT apply to filing.

<i>SERFF Tracking Number:</i>	<i>PRTA-126846396</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>Protective Life Insurance Company</i>	<i>State Tracking Number:</i>	<i>46977</i>
<i>Company Tracking Number:</i>	<i>VICKIE-GAF-P</i>		
<i>TOI:</i>	<i>A02I Individual Annuities- Deferred Non-Variable</i>	<i>Sub-TOI:</i>	<i>A02I.002 Flexible Premium</i>
<i>Product Name:</i>	<i>GAF-P</i>		
<i>Project Name/Number:</i>	<i>GAF-P/GAF-P</i>		

Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Flesch Certification		Yes
Supporting Document	Application		No
Supporting Document	Life & Annuity - Acturial Memo		No
Form	Waiver of Withdrawal Charge and Market Value Adjustment for Terminal Condition		Yes
Form	Waiver of Withdrawal Charge for Terminal Condition or Nursing Facility Confinement		Yes
Form	Waiver of Withdrawal Charge and Market Value Adjustment for Unemployment		Yes
Form	Waiver of Withdrawal Charge for Unemployment		Yes

SERFF Tracking Number: PRTA-126846396 State: Arkansas

Filing Company: Protective Life Insurance Company State Tracking Number: 46977

Company Tracking Number: VICKIE-GAF-P

TOI: A02I Individual Annuities- Deferred Non- Sub-TOI: A02I.002 Flexible Premium
Variable

Product Name: GAF-P

Project Name/Number: GAF-P/GAF-P

Form Schedule

Lead Form Number: SG-GAF-P-5007

Schedule Item Status	Form Number	Form Type Form Name	Action	Action Specific Data	Readability	Attachment
	SG-GAF-P-5007	Policy/Cont Waiver of Withdrawal Initial ract/Fratern Charge and Market al Value Adjustment for Certificate: Terminal Condition Amendmen t, Insert Page, Endorseme nt or Rider			51.600	SG-GAF-P-5007 (Endorsement)pdf
	SG-GAF-P-5008	Policy/Cont Waiver of Withdrawal Initial ract/Fratern Charge for Terminal al Condition or Nursing Certificate: Facility Confinement Amendmen t, Insert Page, Endorseme nt or Rider			51.600	SG-GAF-P-5008 (Endorsement)pdf
	SG-GAF-P-5009	Policy/Cont Waiver of Withdrawal Initial ract/Fratern Charge and Market al Value Adjustment for Certificate: Unemployment Amendmen t, Insert Page, Endorseme nt or Rider			51.140	SG-GAF-P-5009 (Endorsement)pdf
	SG-GAF-P-5010	Policy/Cont Waiver of Withdrawal Initial ract/Fratern Charge for al Unemployment			51.140	SG-GAF-P-5010 (Endorsement

<i>SERFF Tracking Number:</i>	<i>PRTA-126846396</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>Protective Life Insurance Company</i>	<i>State Tracking Number:</i>	<i>46977</i>
<i>Company Tracking Number:</i>	<i>VICKIE-GAF-P</i>		
<i>TOI:</i>	<i>A02I Individual Annuities- Deferred Non-Variable</i>	<i>Sub-TOI:</i>	<i>A02I.002 Flexible Premium</i>
<i>Product Name:</i>	<i>GAF-P</i>		
<i>Project Name/Number:</i>	<i>GAF-P/GAF-P</i>		
	Certificate:).pdf
	Amendmen		
	t, Insert		
	Page,		
	Endorseme		
	nt or Rider		

**WAIVER OF WITHDRAWAL CHARGE AND MARKET VALUE ADJUSTMENT
for Terminal Condition or Nursing Facility Confinement**

We are amending the Contract to which this endorsement is attached by adding the following provision:

Waiver of Withdrawal Charge and Market Value Adjustment for Terminal Condition or Nursing Facility Confinement – We will waive any applicable withdrawal charge and market value adjustment if, after the Issue Date, you or your spouse:

1. are first diagnosed as having a terminal condition by a physician who is not related to you or the Annuitant; or,
2. first enter a hospital or nursing facility and remain confined there for a period of at least thirty (30) days.

A "terminal condition" is a non-correctable medical condition that, with a reasonable degree of medical certainty, will result in death in 12 months or less.

A "physician" is a medical doctor licensed by a state's Board of Medical Examiners, or similar authority in the United States, acting within the scope of her or his license.

For the purposes of this Waiver of Withdrawal Charge and Market Value Adjustment endorsement, the term 'spouse' includes bona fide domestic partners in jurisdictions that afford legal recognition to same sex Civil Unions.

You must request the waiver by Written Notice and submit proof satisfactory to us. Satisfactory proof includes a statement signed by the attending physician or, in the case of hospital or nursing facility confinement, a statement signed by the facility Administrator or other duly designated facility authority.

With respect to a claim based on a terminal condition, we reserve the right to require an examination by a physician of our choice at our expense. In the event of a conflict between the medical opinion of the attending physician and ours, the opinion of our physician shall prevail.

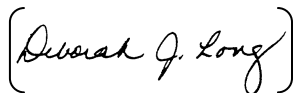
Once the waiver is granted:

- a. no withdrawal charges or market value adjustment will apply to the Contract in the future; and,
- b. no additional Purchase Payments will be accepted; and,
- c. we will not honor any instruction that would begin a new withdrawal charge period.

If we deny the waiver, your withdrawal request will not be processed until you have been notified of the denial and we provide you the opportunity to re-apply for the waiver or cancel your request.

Signed for the Company and made a part of the Contract as of its Issue Date.

Protective Life Insurance Company



Secretary

**WAIVER OF WITHDRAWAL CHARGE
for Terminal Condition or Nursing Facility Confinement**

We are amending the Contract to which this endorsement is attached by adding the following provision:

Waiver of Withdrawal Charge for Terminal Condition or Nursing Facility Confinement –

We will waive any applicable withdrawal charge if, after the Issue Date, you or your spouse:

1. are first diagnosed as having a terminal condition by a physician who is not related to you or the Annuitant; or,
2. first enter a hospital or nursing facility and remain confined there for a period of at least thirty (30) days.

A "terminal condition" is a non-correctable medical condition that, with a reasonable degree of medical certainty, will result in death in 12 months or less.

A "physician" is a medical doctor licensed by a state's Board of Medical Examiners, or similar authority in the United States, acting within the scope of her or his license.

For the purposes of this Waiver of Withdrawal Charge endorsement, the term 'spouse' includes bona fide domestic partners in jurisdictions that afford legal recognition to same sex Civil Unions.

You must request the waiver by Written Notice and submit proof satisfactory to us. Satisfactory proof includes a statement signed by the attending physician or, in the case of hospital or nursing facility confinement, a statement signed by the facility Administrator or other duly designated facility authority.

With respect to a claim based on a terminal condition, we reserve the right to require an examination by a physician of our choice at our expense. In the event of a conflict between the medical opinion of the attending physician and ours, the opinion of our physician shall prevail.

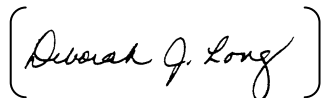
Once the waiver is granted:

- a. no withdrawal charges will apply to the Contract in the future; and,
- b. no additional Purchase Payments will be accepted; and,
- c. we will not honor any instruction that would begin a new withdrawal charge period.

If we deny the waiver, your withdrawal request will not be processed until you have been notified of the denial and we provide you the opportunity to re-apply for the waiver or cancel your request.

Signed for the Company and made a part of the Contract as of its Issue Date.

Protective Life Insurance Company



Secretary

**WAIVER OF WITHDRAWAL CHARGE AND MARKET VALUE ADJUSTMENT
for UNEMPLOYMENT**

We are amending the Contract to which this endorsement is attached by adding the following provision:

Waiver of Withdrawal Charge and Market Value Adjustment for Unemployment – We will waive any applicable withdrawal charge and market value adjustment if, after the Issue Date, either you or your spouse met all of the following conditions:

1. were employed full-time on the Issue Date; and,
2. have been unemployed for at least 60 consecutive calendar days prior to claiming the waiver; and,
3. remain unemployed on the date the withdrawal is requested.

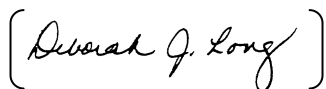
For the purposes of this Waiver of Withdrawal Charge and Market Value Adjustment endorsement, the term 'spouse' includes bona fide domestic partners in jurisdictions that afford legal recognition to same sex Civil Unions.

You must request the waiver by Written Notice and submit proof satisfactory to us that the conditions described above have been met.

If we deny the waiver, your withdrawal request will not be processed until you have been notified of the denial and we provide you the opportunity to re-apply for the waiver or cancel your request.

Signed for the Company and made a part of the Contract as of its Issue Date.

Protective Life Insurance Company



Secretary

**WAIVER OF WITHDRAWAL CHARGE
for UNEMPLOYMENT**

We are amending the Contract to which this endorsement is attached by adding the following provision:

Waiver of Withdrawal Charge for Unemployment – We will waive any applicable withdrawal charge if, after the Issue Date, either you or your spouse met all of the following conditions:

1. were employed full-time on the Issue Date; and,
2. have been unemployed for at least 60 consecutive calendar days prior to claiming the waiver; and,
3. remain unemployed on the date the withdrawal is requested.

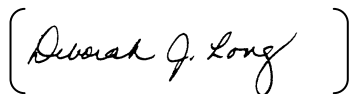
For the purposes of this Waiver of Withdrawal Charge endorsement, the term 'spouse' includes bona fide domestic partners in jurisdictions that afford legal recognition to same sex Civil Unions.

You must request the waiver by Written Notice and submit proof satisfactory to us that the conditions described above have been met. Once the waiver is granted, it remains in effect as long as the three qualifying conditions continue unless: a) you submit an additional Purchase Payment and we apply it to the Contract; or, b) you apply part or all of any Sub-Account's Maturity Value to establish a new Sub-Account. Should this occur, you may request a subsequent waiver provided the three qualifying conditions are again met.

If we deny the waiver, your withdrawal request will not be processed until you have been notified of the denial and we provide you the opportunity to re-apply for the waiver or cancel your request.

Signed for the Company and made a part of the Contract as of its Issue Date.

Protective Life Insurance Company



Secretary

SERFF Tracking Number:	PRTA-126846396	State:	Arkansas
Filing Company:	Protective Life Insurance Company	State Tracking Number:	46977
Company Tracking Number:	VICKIE-GAF-P		
TOI:	A02I Individual Annuities- Deferred Non-Variable	Sub-TOI:	A02I.002 Flexible Premium
Product Name:	GAF-P		
Project Name/Number:	GAF-P/GAF-P		

Supporting Document Schedules

	Item Status:	Status Date:
Satisfied - Item: Flesch Certification		
Comments:		
Attachments:		
AR Certification.pdf		
Readability Certification.pdf		
Statement of Variables.pdf		

PROTECTIVE LIFE INSURANCE COMPANY BIRMINGHAM, ALABAMA

CERTIFICATION OF COMPLIANCE

Arkansas

REGARDING:

FORM NUMBER.....FORM TITLE

SG-GAF-P-5007.....Waiver of Withdrawal Charge and Market Value Adjustment for Terminal Condition
or Nursing Facility Confinement

SG-GAF-P-5008.....Waiver of Withdrawal Charge for Terminal Condition or Nursing Facility Confinement

SG-GAF-P-5009.....Waiver of Withdrawal Charge and Market Value Adjustment for Unemployment

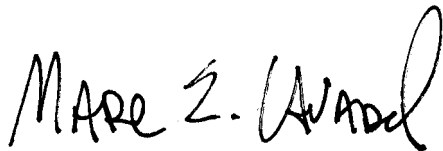
SG-GAF-P-5010.....Waiver of Withdrawal Charge for Unemployment

This is to certify that the Company is in compliance with Arkansas Insurance Department regarding:

Rule and Regulation 19 requirements of Unfair Sex Discrimination in the Sale of Insurance;

Rule and Regulation 49 requirements for Guaranty Association Notice;

Code Ann. 23-79-138 requirements for Consumer Notice.



Marc E. Cavadel, J.D., FLMI, AAPA
AVP – Product Development
Protective Life Insurance Company
October 4, 2010

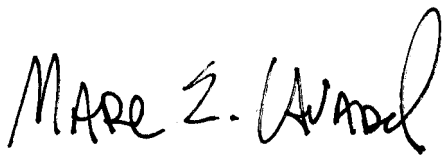
NAIC 458-68136 / FEIN 63-0169720

READABILITY CERTIFICATION

Regarding:	Form Number	Form Title
	SG-GAF-P-5007	Waiver of Withdrawal Charge and Market Value Adjustment for Terminal Condition or Nursing Facility Confinement
	SG-GAF-P-5008	Waiver of Withdrawal Charge for Terminal Condition or Nursing Facility Confinement
	SG-GAF-P-5009	Waiver of Withdrawal Charge and Market Value Adjustment for Unemployment
	SG-GAF-P-5010	Waiver of Withdrawal Charge for Unemployment

This is to certify that the enclosed forms (and the corresponding state specific variations) have been created using fonts of 10 point or greater and have achieved compliance with the requirements for the FLESCH Ease of Reading Test, with scores as outlined in the following table.

	SG-GAF-P-5007	SG-GAF-P-5008	SG-GAF-P-5009	SG-GAF-P-5010
Words:	304	304	246	246
Sentences:	11	11	7	7
Syllables:	457	457	349	349
FLESCH Score:	51.6	51.6	51.14	51.14



Marc E. Cavadel, J.D., FLMI, AAPA
AVP – Product Development
Protective Life Insurance Company

October 4, 2010

Statement of Variability

FORM NUMBER	FORM TITLE
SG-GAF-P-5007	Waiver of Withdrawal Charge and Market Value Adjustment for Terminal Condition or Nursing Facility Confinement
SG-GAF-P-5008	Waiver of Withdrawal Charge for Terminal Condition or Nursing Facility Confinement
SG-GAF-P-5010	Waiver of Withdrawal Charge and Market Value Adjustment for Unemployment
SG-GAF-P-5010	Waiver of Withdrawal Charge for Unemployment

General Variables

1. The appearance of the forms may vary in a non-material fashion depending upon factors including, but not limited to: changes in print vendor, software or hardware configurations; typeface, style and font attributes, but not font size; paper stock and weight; and, the presence or absence of color and shading.
2. No variables will change with respect to in-force contracts without notification, appropriate regulatory approvals, and (where required) consent of the owner.

Specific Variables

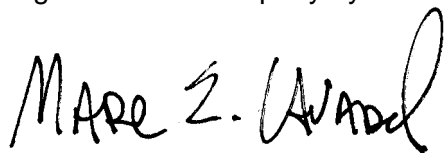
Company Administrative Office Address, Website, and/or Phone Number – *Will only be changed to accurately disclose the company's correct mailing address, internet address and/or phone number.*

Officer Signatures – *Will only be changed to accurately disclose the company's officers. This change would not be made until any required notifications or regulatory filings are completed.*

CERTIFICATION

I certify that the information contained in this Statement of Variability is true and correct to the best of my knowledge and belief, and that I am duly authorized by the company to make this certification.

Signed for the Company by:



Marc E. Cavadel, J.D., FLMI, AAPA
AVP – Product Development
Protective Life Insurance Company
October 4, 2010